



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

PATRICK W. FINNERTY
DIRECTOR

SUITE 1300
600 EAST BROAD STREET
804/786/7933
804/225/4512 (FAX)
800/343-0634 (TDD)

August 14, 2006

Dear Medicaid Providers and Comprehensive Service Act Teams:

The Department of Medical Assistance Services will be conducting training seminars for Medicaid providers and Comprehensive Service Act (CSA) teams. The sessions will focus **Residential Treatment Facility (RTF) – Level C, Treatment Foster Care (TFC)** and include mental health services for children. This training is recommended for administrators, clinicians, and staff responsible for authorizations, referrals, registration/eligibility verification, billing and claims follow-up. Also, this seminar is recommended for local CSA teams and Community Service Board staff to receive information on their responsibilities when referring children for these services. Topics to be discussed:

- Admission Criteria
- Covered Services
- EPSDT
- Quality Management Review
- Medicaid Eligibility Verification Options/Billing

You will find information on the seminar sites attached, along with dates, times and a registration form. **The Medicaid eligibility verification options and billing presentation for RTF and TFC is scheduled for 11:30 am- 1:00 pm.** Please mail **or** fax your registration as designated on the registration form. The completed registration form must be received in our office **five (5)** business days prior to the scheduled seminar. **You will be contacted only if we are unable to accommodate your registration request.** Seminar registrations **will not** be accepted by phone.

People needing reasonable accommodations, should contact the Department of Medical Assistance Services at least two weeks prior to the seminar at (804) 786-1428. Accommodations will **be** provided upon request.

We look forward to your participation in our Medicaid Seminar. If you have any questions regarding these sessions, please call (804) 786-1428.

Sincerely,

Myra M. Smith
Trainer and Instructor III

Enc.: 2

RESIDENTIAL TREATMENT AND TREATMENT FOSTER CARE TRAINING SITES

*******Medicaid Eligibility/Billing 11:30 am- 1:00 pm*******

Date	Location
Friday - September 15, 2006 Registration <u>Morning- 8:30 am / Afternoon - 1:00 pm</u> RTF 9:00 am – 11:30 am TFC 1:30 pm – 4:00 pm	Chippenham Hospital Kraus Auditorium 7101 Jahnke Road Richmond, VA 23225
Thursday - September 21, 2006 Registration <u>Morning-8:30 am /Afternoon- 12:30 pm**</u> RTF 9:00 am – 11:30 am **TFC 1:00 pm – 3:30 pm** **Please note the different start time for TFC**	Fairfax Government Center Board Room Auditorium 12000 Government Center Pkwy. Fairfax, VA 22035
Wednesday - September 27, 2006 Registration <u>Morning- 8:30 am / Afternoon- 1:00 pm</u> RTF 9:00 am – 11:30 am TFC 1:30 pm– 4:00 pm	VA Beach Central Library Auditorium 4101 VA Beach Blvd. VA Beach, Virginia 23452
Tuesday - October 3, 2006 Registration <u>Morning- 8:30 am / Afternoon- 1:00 pm</u> RTF 9:00 am – 11:30 am TFC 1:30 pm – 4:00 pm	Virginia Highlands Community College Learning Resource Center – Bldg. 605 1VHCC Drive Abingdon, VA 24212
Friday - October 20, 2006 Registration <u>Morning- 8:30 am / Afternoon- 1:00 pm</u> RTF 9:00 am – 11:30 am TFC 1:30 pm – 4:00 pm	Dept. of Environmental Quality (DEQ) 2nd Floor Meeting Room 3019 Peters Creek Road Roanoke, VA 24019

DIRECTIONS

CHIPPENHAM HOSPITAL – Kraus Auditorium

From the north: **I-95** south to **I-195 West**. Merge onto the **Downtown Expressway** (toll). Exit onto **Powhite Parkway** towards VA-150/VA-288/US-60. Proceed on **Powhite Parkway** (toll) to the **Jahnke Road East** Exit. Bear right at the fork in ramp. Hospital will be on your right about ¼ mile. **From the south:** **I-95** north to **Chippenham Parkway North**. Exit at **Jahnke Rd**, and turn right. Hospital is on the right. **Park in the Visitor and Employee Parking Area**. Enter through the entrance of Tucker Pavilion and take a right to Kraus Auditorium.

Fairfax – Fairfax County Government Center- Auditorium

From I-66, exit onto Fairfax County Parkway North (Route 7100, Exit #55B). Turn right onto Fair Lakes Parkway East. Turn right onto Monument Drive. Turn right onto Government Center Parkway. The Government Center is on the left.
From Route 50, exit on West Ox Road South (Route 608). Left turn at light on Monument Drive. Turn right at light onto Government Center Parkway. Government Center is on your left.

VA BEACH- Virginia Beach Central Library- Auditorium

From I-264 East- Take Independence Blvd. (towards Pembroke). Turn right onto Virginia Beach Blvd. (U.S. 58). The library will be on the left. There will be a Central Library sign. **The entrance to the training is on the right side of the Library.**

ABINGDON- Virginia Highlands Community College – Building 605, Learning Resource Center

Hwy. 81 to Exit 14 to Route 140 North (Jonesboro Road). Follow to 1 VHCC Drive and turn right. At the entrance to the campus, there is a map showing the buildings. Take first left turn. Presentation will be held in Building 605, first building on the driveway- in the Learning Resource Center. Please park in lots 4, 5 or 6.

ROANOKE – Department of Environmental Quality West Central Regional Office

From Route 220 North, Route 460 East or Interstate 581 North: Take I-581 North to the second Peters Creek Road exit, number 2S. Go south on Peters Creek Road. After the second stoplight, turn left into Brammer Village. Go to the left in the parking lot and continue up the hill. DEQ is the third building (number 3019) on the right. **From I-81 North and South:** Take exit 143 to I-581. Take the first Peters Creek Road exit, number 2S. Turn right on Peters Creek Road. After the second light, turn left into Brammer Village. Go to the left in the parking lot and continue up the hill. DEQ is the third building (number 3019) on the right. Please park in the spaces on the driveway or immediately behind the building.

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

**Department of Medical Assistance Services
Residential Treatment and Treatment Foster Care Training**

PROVIDER NAME _____

PROVIDER ADDRESS _____

CONTACT PERSON (if questions): _____

TELEPHONE NUMBER: _____

FAX NUMBER: _____

EMAIL: _____

LOCATION- RTF or TFC Session	NAME OF PARTICIPANT

PLEASE RETURN TO: DEPT. OF MEDICAL ASSISTANCE SERVICES

**TRAINING UNIT
600 E. BROAD ST., SUITE 1300
RICHMOND, VA 23219**

FAX: (804) 786-6229 or (804) 225-4393

INFORMATION: (804) 786-1428